

PART B - FEE(S) TRANSMITTAL



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APPLICATION NO.	FILING DATE	FILING DATE FIRST NAM		VENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/815,275	03/23/2001	Manus P. Henr		enry	02052-104001 / GML2209	4576
TITLE OF INVENTION: PROCESS MONITORING AND CONTROL USING SELF-VALIDATING SENSORS						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330		\$300	\$1630	09/07/2004
EXAM	ART UNIT		CLASS-]		
NGHIEM, MICHAEL P		2863		SUBCLASS 702-179000		
			03	702-179000		
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1. Fish & Richardson P.C. 2. 3.			
Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE (CITY and STATE OR COUNTRY)						
Invensys Systems, Inc. Foxboro, MA						
Please check the appropriate assignee category or categories (will not be printed on the patent): [] individual [X] corporation or other private group entity [] government						
4a. The following fee(s) are enclosed: [X] Issue Fee [X] Publication Fee [X] Advance Order - # of Copies 10			4b. Payment of Fee(s): [X] A check in the amount of the fee(s) is enclosed. [] Payment by credit card. Form PTO-2038 is attached. [X] The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-1050 (enclose an extra copy of this form).			
Director of Patents is reques	tell to hiply the Issue Fee and	Publication Fee			y paid issue fee to the application identifie	ed above.
(Authorized Signature)		S 9.		 09/01/20	NA FORUROVO AAAAAAFE AAAAFAGA	
Gregory A. Walters, Reg. No. 41,366 (Date) 8-31-04 09/01/2004 EABUBAK2 00000055 09815275						
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Attorney's Docket No.: 02052-104001 / GML2209 - Invensys Ref. 00,007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Manus P. HENRY et al.

Art Unit

2863

Serial No.: 09/815,275

Examiner:

M. Nghiem

Filed

: March 23, 2001

Confirmation No.:

4576

Title

: PROCESS MONITORING AND CONTROL USING SELF-VALIDATING

Notice of Allowance Date: June 7, 2004

SENSORS

MAIL STOP ISSUE FEE

Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed June 7, 2004, enclosed are completed issue fee transmittal form PTOL-85b and a check for \$1660 for the required issue fee and publication fee, including patent copies.

Please apply any additional charges or credits to our Deposit Account No. 06-1050.

Respectfully submitted,

8-31-2004 Date:

> alters N. 41,366

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